

The Impact of Gender Roles on the Likelihood of STI Testing in College-Age Women

An Honors Thesis (HONR 499)

by

Sarah Mueller

Thesis Advisor:

Dr. Tya Arthur

Ball State University

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Abstract

The research questions that this study was challenged with answering were (1) What is the prevalence of sexually transmitted infections (STI's) in college-aged women in the United States (2) How do gender roles impact the likelihood of STI testing? And (3)How does STI status impact women's role in society in the college setting? As STI incidence and prevalence increase across the nation, understanding the roles that women play in their social circles will aid in the development of prevention programs in the future. This study was a two-part study, that included a literature review, as well as qualitative interviews. The qualitative interviews were conducted using an interview guide developed for this research. The interview guide focused on experts on sexual health in college campuses to develop a deeper understanding of the impact of gender roles on college-aged women. The literature review was completed to develop an understanding of the impact of STI transmission and gender roles on the nation as a whole. The interviews demonstrated that experts see the priorities of college-age women as pregnancy prevention, rather than STI transmission prevention. In addition, the interviews showed that there is often a perceived power imbalance between male and female partners. The literature review demonstrated similar themes, as well as expanding upon the priorities of college-age men and women in regards to their sexual health. It can be concluded that many college-aged women lack power in their relationship, and the commonly applied gender role for women is that the men will decide if protection is used or not. Education should be implemented to teach men and women that STI prevalence is a real concern, to protect the sexual health of men and women.

Keywords: Sexually Transmitted Infections, Women's Health, Sexual Health, College Health.

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All of the professors I have had the pleasure to get to know at Ball State that inspired me to attempt to do my own research, and I cannot thank them enough for their support and encouragement.

I would also like to thank my parents, sister, and my friends who have supported me through this entire process.

Process Analysis Statement

This thesis started as a summation of my entire student career. Not just one aspect, but the entire thing. I wanted to include a nod to my time abroad in South Africa, and also a nod to my major and minor. To do this, I planned to focus on the transmission of HIV in Women, and how the role of women in South Africa and the United States played a role in their likelihood of acquiring HIV. However, as with most plans, things did not go according to plan. I planned to interview experts from both countries about the differences in culture, and then write a report on the similarities and differences within each culture. I found it impossible to connect with any South African, which was disappointed as I had spent a significant amount of time studying there. I struggled to find any American experts on HIV and this led to my entire idea for this thesis going from a summation of my past to a glimpse into my future. The plan of this thesis was not always fluid, but at times it felt like a river taking over. Qualitative analysis, though seemingly simple, is an incredibly daunting task. While many people helped me along the way, this thesis was no easy task. As I created the outline and curated the idea for this thesis, it became clear that there would be many hurdles that I would face.

Perhaps the most challenging hurdle I encountered was finding people to interview. The qualitative analysis focuses strongly on interviewing and gleaning data from the words and ideas that the interviewees share. I reached out to over twenty people, who have devoted their lives work to HIV research and interventions, and yet I did not have a single person to interview. It was incredibly disheartening. As I realized that I would not find anyone to talk to me about HIV transmission, I slowly workshopped the idea of how gender roles and culture impact the transmission of all sexually transmitted infections in women on college campuses. This time, though I reached out to fifteen experts, I interviewed three. Each of my interviewees stated that they “didn’t know if they were the best people to talk about the topic,” demonstrating that even though they met my criteria, they were not confident in their knowledge. This required reassurance, some explanation, and patience.

The next hurdle I faced was actually interviewing people. This was an intimidating task! I was talking with some of the most educated people I know, and they were answering questions that I wrote. I was surprised to have stumped them on more than one question, and I was excited to know that they were impressed by my research. I eventually overcame my nerves and completed the interviews with my subjects.

While this process was intimidating and challenging, I learned what really goes into the qualitative analysis process. I learned that it may be easier to distribute a survey to 100 people than to find five to interview. I learned that patience is more important in all research than I originally guessed it would be. I also had the opportunity to learn that no plan goes perfectly and that being adaptable is one of the best skills one can have.

While South Africa will always hold a piece of my heart, and I will always love talking about Health Promotion, I now am looking to the future. I hope to research and design new ways to help young people in America, and all over the world, protect themselves from sexually transmitted infections, including HIV. I was forced to grow and think outside of the box with this thesis, which was both irritating and exciting. I had the chance to act like a professional among professionals, and I am excited to share my first attempt at a manuscript with those whom I look up to, the same people who helped me create this piece of work.

Written Thesis

Background

Introduction

There has been a significant increase in the transmission of sexually transmitted infections (STI's) in the United States (2018 Sexually Transmitted Diseases Surveillance, 2019). In fact, 2018 had the highest reports of STI's on record in the United States. In the United States, there were 2,295,739 reported cases of STIs in 2017 (Center for Disease Control, 2017). This is the fourth consecutive year that the number of cases of sexually transmitted infections has increased significantly, according to the Centers for Disease Control (CDC). There are many populations that are extremely at risk for contracting STI's, one of which being young people, specifically women, between the ages of 15 and 22.

College students, many of which are experiencing their first taste of freedom, are one of the most at-risk populations for sexually transmitted infections (McLaurin-Jones, Lashley & Marshall, 2017). College may be the first time that teenagers are exposed to recreational alcohol use, drug use, and mature, sexual relationships. Though the incidence of STI's is increasing, the majority of college students prioritize pregnancy prevention over STI prevention, which leads to less condom usage among this population (Breny & Lombardi, 2019). Many college-age women choose other methods of pregnancy prevention, such as hormonal birth control or intrauterine device (Breny & Lombardi). In many situations, if the woman uses another form of birth control, the man is less likely to use a condom. In women, sexually transmitted illnesses can impact fertility, in addition to overall sexual wellness (Tsevat, Wiesenfeld & Park, 2017). Sexually

transmitted diseases are now being linked to chronic illnesses and even cancer (Berman and Schiller, 2017). According to the CDC, Chlamydia can be especially harmful to young women, as it can cause Pelvic Inflammatory Disease which can lead to an ectopic pregnancy (Center for Disease Control, 2017). While these issues are severe, there is a wide variety of sexual health education for college students.

Access to sex education and health care varies widely from one college campus to another. This results in many students not getting the education to protect themselves, or the health care to treat any problems that a student may come across (Sullivan & Georgia Family Planning System). This culture has led to an increase in undiagnosed sexually transmitted infections and the untended spread to sexual partners (Breny & Lombardi, 2019). In fact, many high school students are not exposed to sex education, and by the time they get to college, the lack of education is clear (Willis, Jozkowski & Read, 2019). Among millennials, there is an increase in internet usage and a decrease in sex education in schools. Because of this, more and more young people are relying on pornography as part of, if not all of their sex education. This can lead to a number of problems for overall health as condom use is rare in pornography (Sun, Bridges, & Johnson, 2016). In addition, pornography often portrays an unhealthy relationship dynamic that can contribute to toxic masculinity or even toxic relationships (Sun, Bridges, & Johnson, 2016).

Women, especially, are at risk for STI's as the use of a condom is generally linked to the power struggle within a relationship (Breny & Lombardi, 2019). Of women ages 14-19, it has been reported that one in four will have at least one common STI (Broadus, Morris, & Bryan, 2010). Because women often have less power in a relationship, they are more susceptible to a

sexually transmitted infection (Breny & Lombardi, 2019). One of the biggest reasons that college-age women lack power in their relationships is due to toxic masculinity (McDermott, Kilmartin, McKelvey & Kridel, 2015). This culture gives men hypermasculinity, which teaches them that emotions make them seem weakly and that they need to do more to seem strong (McDermott, et. al., 2015). Some men will take power away from their romantic partners as a result of the impacts of toxic masculinity (McDermott, et. al., 2015). This has led to an increase in sexual assault and unhealthy relationship dynamics (McDermott, et. al., 2015). Additionally, when men know that their partner takes hormonal birth control, they are less likely to use a condom or a barrier method during sex (Breny & Lombardi, 2019).

Because of the increase in STI's, and the current culture surrounding relationships and safe sex practices, this study aims to answer the following research questions: What is the prevalence of sexually transmitted infections in college-age women in the United States? How does the gender role of the typical college female impact their likelihood of getting a sexually transmitted infection? How does a woman's STI status impact their role in society in the college setting? The purpose of this study is to identify the impact of gender roles in college-age women, and how it impacts the prevalence of sexually transmitted diseases in the United States.

Methods

Part One: Literature Review

This study was completed in two parts. The first part was an extensive literature review focused on the incidence and prevalence of STIs among women in the United States that are currently attending college. There were 15 articles from peer-reviewed sources. The literature review involved keyword searches in databases, including PubMed, PsycINFO, Medline, and Google

Scholar. The keyword searches used included “sexually transmitted infections”, “gender roles”, “women” “Testing availability”, and “United States.” The inclusion criteria for the articles included in the literature review were (1) being published between 2009 and 2019, (2) being published in the United States, (3) published by a scientific journal, federal institution or an educational institution. Each included article was read by the researcher and synthesized into the literature review.

Part Two: Qualitative Interviews

The second part of the study was qualitative interviews with 3-6 experts on sexual health in college students in the United States.

Participants

The interview participants included 3-6 experts. Each expert had a background in the research field and had knowledge of the prevalence and implications of STI's in college-age women. All of the participants currently work at academic or researcher university. 66% percent of the participants were female and 33% percent were male and the vast majority were non-Hispanic whites (100%) and over the age of 40. All of the participants had doctorate degrees and were employed by Ball State University.

Measures

Demographic Questionnaire. Demographic questions asked participants about their education, current work location, workplace setting, gender, age, and race/ethnicity.

Interview Guide. The interview guide was developed by the researcher and included seven questions. The questions were developed using peer-reviewed literature and the study's research questions as guidance. The questions focused on the gender roles of women on college campuses

and intersected how gender roles affect the transmission of and testing availability for STI's. For women. For example, the participants were asked, "How do gender roles of women impact the transmission of STI's?"

Procedure

The study was approved by the Institutional Review Board at Ball State University. Participants were recruited through an internet search and personal contacts. Each potential participant was sent an email that stated the purpose of the study, what participation in the study involved, and any risks or benefits of participation. Participants who agreed to participate read and signed an informed consent form and were given a demographic questionnaire to complete online. After completion of the consent form, a time was scheduled to complete the interview in-person, by telephone, or video-conference.

Before beginning each interview, the participant was reminded that all information shared will be kept strictly confidential. In addition, participants were informed that they would be given access to resources if they were uncomfortable with the subject of the interview after the interview occurred, and were given the option to end the interview if they felt uncomfortable at any time. All participants were asked all seven questions on the interview guide and each interview was audio-recorded. Upon completion of the interview, each interview audio-recording was transcribed for qualitative analysis.

Data Analysis

Qualitative analysis was conducted using Microsoft word and transcriptions of the interviews. The interviews were coded with the primary codes being "definition of gender roles", "gender roles having a positive impact on a females life", "gender roles having a negative

impact on a females life”, “gender role impacting sexual relationships”, “gender roles negatively impact sexual health” and “power dynamics in relationships impact sexual health.”

Results

Demographics

Table 1: Demographic of Study Participants

Table 1. Demographics of Study Participants (N=3)

Variable	Number	Percent
Race/Ethnicity		
Non-Hispanic White	3	100%
Non-Hispanic Black	0	0%
Hispanic	0	0%
Asian American	0	0
American Indian/Alaska Native	0	0
Native Hawaiian/Other Pacific Islander	0	0
Multi-Racial	3	100%

Gender		
Male	1	33%
Female	2	66%
No Response	0	0%
Age		
0-20	0	0%
20-40	1	33%
40-60	2	66%
Highest Level of Education		
High School Completed	0	0
Bachelors Degree Completed	0	0
Masters Degree Completed	0	0
PhD/MD Completed	3	100%

Table 2. Subjects and Themes from the Interviews

Subject Matter	Themes
Prevalence of STI's are increasing	Most experts perceive HPV and other common STI's to be increasing overall in the college age demographic.
Role/Definition of Gender Roles	Gender roles impact how one acts in certain settings, and dictate how people interact with each other.
Gender Roles of Women in College Campuses	Women are socialized to be more submissive, perhaps looking for a husband and a career.
Impact of Gender Role on Romantic Relationships	Women are generally expected to be submissive, and the home maker. Even in college relationships, women are more likely to be the caretaker.
Power Dynamic in Heterosexual Relationships as it Impacts a Womans Health	Because women are more likely to be submissive, this puts the power and some of the decision making in the hands of the male. Men hold the power, and therefore have a greater say in the use of condoms and other preventive measures.

Protection Priorities of College Students in Heterosexual Relationships	Most college students prioritize pregnancy prevention over STI/HPV transmission prevention, so if the female is on hormonal birth control, it is less likely that the male will opt to use or advocate for a condom.
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Prevalence of STI's are Increasing

As the experts began discussing the college culture, it became clear that overall STI's are accurately perceived to be increasing. To quote one participant, "they (STI's) are increasing. HPV is now the most common STI. Some bacterial STIs are very common as well." As more students travel to college, they are engaging with more sexual partners and more diseases are being transmitted. Additionally, another participant stated "I know that gonorrhea rates are increasing. I think, particularly among black men and women." Gonorrhea, Chlamydia, and Syphilis rates are increasing quickly, according to the CDC. A particular group of concern are minorities, who may have been exposed to less education or have less access to health care.

Role/Definition of Gender Roles

"Men mow the lawn, women wash the dishes." Every study participant gave the same example of traditional gender roles within the American society. A more indepth quote about the definition of a gender role is as follows: "It's what we perform. It's like we perform a certain way of being in the world and some of those ways of being are more feminine, some are more masculine. So it's a performance and some activities associated with the performance of being a

woman or perhaps taking care of children, putting on makeup, dressing a certain way.” However, when they were asked to discuss how the gender roles impacted women who were college-aged, or who lived on college campuses, the answers varied much more.

Gender Roles of Women in College Campuses

“but probably the perception is that sorority girls are pretty that they are blonde and that they do service.” This quote demonstrates a common perception of a subgroup of women common on college campuses, that some women value extracurriculars and aesthetics, in addition to career building. “ I think there are some young women on campus who are actively pursuing a life goal that involves marriage and family and children and colleges just one step on that trip.” This quote demonstrates a common stereotype that is applied to women who attend college. Women are expected to pursue a family with the same vigor that some men pursue a career. This idea is commonly accepted by the millennial generation, as many are familiar with the idea of a stay at home mom, but it is less likely that men are stay at home dads accepted as a career for men.

Impact of Gender Role on Romantic Relationships

The lives of women on college campuses involve many aspects that impact their lives in many ways. However, the focus here is on how their gender role determines how they act within their romantic relationships. “If you're in a heterosexual relationship, are going to interact with the masculine gender type in gender role. So, in relationships, I think I could speak to mine, I'm often the one that's planning things. I follow up on details.” This quote demonstrates that the

woman is often the one who ensures that all the details of the plans are taken care of. This can be expanded and applied to different aspects of the women's relationships, from making plans for dates to making plans for sexual intercourse.

Power Dynamic in Heterosexual Relationships as it Impacts a Woman's Health

It is generally perceived that in heterosexual relationships in young adults, men hold more power in the relationship than women do. This is partially due to culture on college campuses, where men do things such as pay for dates. Additionally, this can be applied to the sexual relationship between college age men and women. Men generally decide whether condoms will be used, which in turn determines if the woman will be exposed to an STI or not. Regarding this idea, one participant said “The female's more likely to go along with whatever if they were the male partner more likely to go along with the male, whatever they say they're going to do.” The female is more likely to allow the male to make decision about sexual decisions because the male holds more power in the relationship. Additionally, since the male is the one who wears the condom, the male is generally empowered to make the condom decision. “It is typically seen that men are the ones who purchase and bring the condom when having sex. This will impact a woman because she is dependent on him “doing what is right” and bringing the condom” The male supplying the condom gives him power over the decision to practice safe sex.

Protection Priorities of College Students in Heterosexual Relationships

It was reflected in both the literature and the interviews that STI prevention is not a top priority for most college students, especially those who are in committed, monogamous

relationships. The main priority of these sexually active populations is pregnancy prevention. While unplanned pregnancy is a negative outcome from sexual intercourse, STI transmission is more common in the college community. “I think as treatments for HIV infection have gotten better and have prevented HIV from being just a death sentence in people, in college now or less likely to think of HIV as a motivation by itself to practice prevention and so maybe are a little bit less. For decades, HIV was such a concern that people diligently practiced prevention because they didn't want it in particular. I think they're less focused on that and so they're also less thinking about the others” While concerns in college aged students about HIV are extremely low, this quote demonstrates the shift in the perception of STI's. The treatment has gotten better, so students do not take the risk of STI's as seriously as they do for unplanned pregnancy, which is more difficult to deal with.

Discussion

College age women that are in heterosexual relationships are at a significant risk of acquiring and transmitting sexually transmitted diseases (Breny & Lombardi, 2019). This is due to many factors, but the most prominent are that protection against STI's is not a priority for many college age students, and that males generally make the decisions about the methods of protection that the couple will use (Breny & Lombardi, 2019).

The result that most women are not in control of their own sexual health was surprising, if not alarming. More and more women are falling victim to men who are positive for STI's, but are not sharing the information with the women, or aware of it themselves (Breny & Lombardi, 2019). The result of prioritizing pregnancy prevention over prevention of STI's was again

surprising. This was surprising because STI frequency is much higher than unplanned pregnancy, however students and experts did not seem to consider STI's when it came to sexual protection (Centers for Disease Control, 2017). The limitations to this study were that only one college campus was examined. Also, only three experts were interviewed. Repeating the research on more college campuses would demonstrate a more holistic view of college women throughout the United States, and even the world. It would be beneficial to interview more than just researchers, but also medical doctors and nurses who see and counsel patients. Additionally, it would be valuable to have a cross sectional survey for women in college and their sexual partners to fill out, in addition to qualitative interviews done with the leading experts on women's health on college campuses.

The implications for this research are vast. This research is relevant to health educators because it will help them tailor their approach to educating women on sexual health and protection, and they can educate them to advocate for themselves. As health educators familiarize themselves with how women view themselves, they will be able to create a much more tailored approach to addressing intimate and specific issues, such as how to ensure that their partner is using a condom, or how to ensure that their partner has had a recent STI screening test. It will also help health educators educate males as it can show them the responsibility that men have for their partners health if they chose to have an unbalanced power dynamic. Additionally, this research can assist physicians to understand what risks their patients may have, and how to prevent the spread of STI's. One of the most important ways to limit the spread of STI's is knowing ones STI status, so physicians may use this research to urge college age women to get tested more frequently.

This research has demonstrated that women perceive that they have limited power in their sexual relationships. Furthermore, it has shown that women are less likely to insist on protective measures being taken, and that women and men are more concerned with preventing pregnancy than preventing STI transmission. This research can be used for health educators to tailor their programming to ensure that they are reaching college age men and women in the most effective way possible to ensure that the rate of STI transmission is significantly decreased.

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